## 3031022858

FEC

## STATEMENT OF ORGANIZATION

RECEIVED

FORM 1		ONGANIZ	AHON	2013 JAN 30 AM 10: 21
NAME OF COMMITTEE (in	full) X	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
Life Cause				
			<u> </u>	
ADDRESS (number ar		90 Main Street	11111111	
X ◀ (Check if a	1001699	Suite 213 A		
is changed	)	Centerbrook	. <del> </del>	CT 06409 1058
	<u></u> :	CITY A		STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MA	IL ADDRESS			
(Chack if s	i	nfo@lifecauser	oac.org	
is changed	i)			
	Opt	tional Second E-Mail Ad	ddress	ı
	لــا			
2. DATE 0	L.	ž2013		<u> </u>
3. FEC IDENTIFIC	CATION NUMBE	ER • C. O	00502963	
4. IS THIS STATEM	MENT	NEW (N) OR	X AMENDED (A)	·
I certify that I have e	examined this St	atement and to the bes	st of my knowledge and belief it	is true, correct and complete.
Type or Print Name	of Treasurer _	Raymond Bech	ard	
Signature of Treasure	er A			Date 01 15 2013
NOTE: Submission of			n may subject the person signing the TION SHOULD BE REPORTED W	nis Statement to the penalties of 2 U.S.C. §437g. ITHIN 10 DAYS.
Office Use Only			For further Information oc Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	FFL. FLIBIUL